

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
09/773,164
APPLICANT(S)

FILING DATE
1-31-01

CLAIMS

AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.
1	/			
2	/			
3	/			
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TOTAL IND.	3			
TOTAL DEP.	15			
TOTAL CLAIMS	18			

IND.	DEP.	IND.	DEP.	IND.	DEP.
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100					
TOTAL IND.					
TOTAL DEP.					
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